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Fill in this information to identify your o	ase:	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		
Case number (if known):	Chapter you are filing under:  ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13	☐ Check if this is an amended filing

#### Official Form 101

#### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Your full name Write the name that is on your Mitch government-issued picture First Name First Name identification (for example, your driver's license or Middle Name Middle Name passport). Kasperek Last Name Bring your picture Last Name identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) All other names you Mieczyslaw have used in the last 8 First Name First Name years Krzysztof Middle Name Middle Name Include your married or Kasperek maiden names. Last Name Last Name Only the last 4 digits of xxx - xx - 1 3 5your Social Security number or federal OR OR **Individual Taxpayer** Identification number 9xx - xx -9xx - xx -(ITIN) Any business names I have not used any business names or EINs. ☐ I have not used any business names or EINs. and Employer **Identification Numbers** Business name Business name (EIN) you have used in the last 8 years Business name Business name Include trade names and doing business as names Business name Business name

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Deb	otor 1	Mitch Kasperek			Case nu	mber (if known)			
			Abo	out Debtor 1:	Abo	out Debtor 2 (Spouse Only in a Joint Case):			
			EIN		EIN				
5. Where		you live	EIN		EIN If D	ebtor 2 lives at a different address:			
				30 Waukegan Rd					
				nber Street	Num	nber Street			
			Ap	i. 116					
				rton Grove IL 50053					
			City	State ZIP Code	City	State ZIP Code			
			Cou Cou		Cou	nty			
			the cou	our mailing address is different from one above, fill it in here. Note that the rt will send any notices to you at this ling address.	fror will	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.			
			Nun	nber Street	Number Street				
			P.O	Вох	P.O.	Вох			
			City	State ZIP Code	City	State ZIP Code			
6.		ou are choosing	Che	eck one:	Che	Check one:			
		district to file for skruptcy	Ø	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
				I have another reason. Explain. (See 28 U.S.C. § 1408.)		I have another reason. Explain. (See 28 U.S.C. § 1408.)			
Р	art 2:	Tell the Court Abo	out Y	our Bankruptcy Case					
7.		apter of the ptcy Code you		k one: (For a brief description of each, see Nankruptcy (Form 2010)). Also, go to the top of		quired by 11 U.S.C. § 342(b) for Individuals Filing and check the appropriate box.			
	are cho	osing to file	П	Chapter 7					
			_	Chapter 11					
			ب	Chapter 12					
			_	•					
				Chapter 13					

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Deb	otor 1 Mitch Kasperek	Mitch Kasperek Case number (if known)										
8.	How you will pay the fee	cou	lly, if you are pay r attorney is subi	check with the clerk's office in your local if you are paying the fee yourself, you may ttorney is submitting your payment on your with a pre-printed address.								
			I need to pay the fee in installments. If you choose this option, sign and attach the Application Individuals to Pay Your Filing Fee in Installments (Official Form 103A).									
		By that fee	equest that my fee be waived (You may re law, a judge may, but is not required to, wain 150% of the official poverty line that appliin installments). If you choose this option, ng Fee Waived (Official Form 103B) and file	ve your es to you you mus	fee, and may do ur family size an st fill out the App	so only if your income is less d you are unable to pay the						
9.	Have you filed for	<b>☑</b> No										
	bankruptcy within the last 8 years?	☐ Yes	5.									
	,	District		When		Case number						
		District										
		District		- wnen	MM / DD / YYYY	Case number						
		District		When	MM / DD / YYYY	Case number						
10	Are any bankruptcy	<b>√</b> No			MM / DD / YYYY							
	cases pending or being	<u> </u>	<b>,</b>									
	filed by a spouse who is not filing this case with	☐ Yes			Polationsh	sin to you						
	you, or by a business partner, or by an											
	affiliate?	District		- wilen	MM / DD / YYYY							
		Debtor			Relationsh	nin to you						
						Case number,						
		District		- wilen	MM / DD / YYYY							
11.	Do you rent your residence?	✓ No.	<ul><li>Go to line 12.</li><li>Has your landlord obtained an eviction juresidence?</li></ul>	udgmen	t against you an	d do you want to stay in your						
			<ul><li>No. Go to line 12.</li><li>Yes. Fill out Initial Statement Abou and file it with this bankruptcy petiti</li></ul>		ction Judgment	Against You (Form 101A)						

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Debtor 1		Mitch Kasperek				C	Case number (if known)					
Pa	art 3:	Report About Ar	y Bı	ısine	sses You Own as	a Sole Proprie	tor					
12.		u a sole proprietor full- or part-time ss?			Go to Part 4. Name and location of b	ousiness						
	busines individu separate	oroprietorship is a s you operate as an al, and is not a e legal entity such as ration, partnership, or			Name of business, if any  Number Street							
	If you ha	ave more than one prietorship, use a e sheet and attach it etition.			City  Check the appropriate box to describe your business:  Health Care Business (as defined in 11 U.S.C. § 101(27A))  Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  Stockbroker (as defined in 11 U.S.C. § 101(53A))  Commodity Broker (as defined in 11 U.S.C. § 101(6))  None of the above							
13. Are you filing under  Chapter 11 of the  Bankruptcy Code and are you a small business  If you are filing under Chapter 11, the court must know whether you are a small business debtor, y most recent balance sheet, statement of operations, cash-flow statement, and federa or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)								ou must attach your I income tax return				
	debtor	?		No.	I am not filing under C							
		efinition of small s debtor, see		No.	I am filling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.							
	11 U.S.C. § 101(51D).			Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.							
Pa	art 4:	Report If You Ov	vn oı	r Hav	e Any Hazardous I	Property or Ar	y Property Tha	t Needs In	nmediate Attention			
14.	propert alleged immine	own or have any y that poses or is to pose a threat of nt and identifiable		No Yes.	What is the hazard?							
	safety? any pro	to public health or Or do you own operty that needs ate attention?			If immediate attention							
	perisha livestoc a buildii	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		hable goods, or ock that must be fed, or Where Iding that needs urgent		Where is the property	Where is the property?  Number Street					
						City		State	ZIP Code			

Debtor 1 Mitch Kasp	oerek		Ca	ase number (if kno	wn)	
Part 5: Explain	Your Efforts to Re	ceive a Briefing About Credi	it Co	ounseling		
15. Tell the court whether you have received briefing about credit counseling.	counseling agen filed this bankru certificate of cor	fing from an approved credit acy within the 180 days before I ptcy petition, and I received a appletion.	Yo	ou must check one I received a brie counseling ager filed this bankru certificate of co	fing from an approved credit ncy within the 180 days before I optcy petition, and I received a mpletion.	
The law requires		the certificate and the payment rou developed with the agency.			the certificate and the payment you developed with the agency.	
that you receive a briefing about credit counseling before you file for bankruptcy. You	counseling agen	fing from an approved credit acy within the 180 days before I ptcy petition, but I do not have ompletion.		counseling ager	fing from an approved credit ncy within the 180 days before I ptcy petition, but I do not have ompletion.	
must truthfully check one of the following choices.	•	iter you file this bankruptcy petition, copy of the certificate and payment		•	fter you file this bankruptcy petition, copy of the certificate and payment	
If you cannot do so, you are not eligible to file.  If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin	services from ar unable to obtain days after I mad circumstances in waiver of the red To ask for a 30-d requirement, attaefforts you made were unable to obtain a services from a service from a services from	ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you otain it before you filed for		☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining wefforts you made to obtain the briefing, why you were unable to obtain it before you filed for		
collection activities again.	required you to fil	what exigent circumstances te this case.		required you to file	what exigent circumstances le this case.	
	dissatisfied with y	e dismissed if the court is your reasons for not receiving a ou filed for bankruptcy.		dissatisfied with y	Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.	
	still receive a brie You must file a ce along with a copy	sfied with your reasons, you must sting within 30 days after you file. ertificate from the approved agency, of the payment plan you. If you do not do so, your case dd.		If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agenc along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.		
	•	the 30-day deadline is granted only imited to a maximum of 15 days.		•	the 30-day deadline is granted only imited to a maximum of 15 days.	
	☐ I am not required credit counselin	d to receive a briefing about g because of:		I am not require credit counselin	d to receive a briefing about g because of:	
	☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		☐ Incapacity.	I have a mental illness or a menta deficiency that makes me incapable of realizing or making rational decisions about finances.	
	☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	
	☐ Active duty.	I am currently on active military duty in a military combat zone.		☐ Active duty.	I am currently on active military duty in a military combat zone.	
	•	are not required to receive a dit counseling, you must file a			u are not required to receive a edit counseling, you must file a	

motion for waiver of credit counseling with the court.

motion for waiver of credit counseling with the court.

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Debtor 1 Mitch Kasperek			Case number (if known)										
P	art 6:	Answer These C	uest	ions	for Reporting	Purpos	ses						
16.	What k have?	ind of debts do you	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  ✓ Yes. Go to line 17.										
			<ul> <li>16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.</li> <li>No. Go to line 16c.</li> <li>Yes. Go to line 17.</li> </ul>										
			16c	Stat	te the type of debts	s you ow	e that are not consi	umer or busir	ness	s debts.			
17.	Are you	u filing under er 7?	$\overline{\mathbf{V}}$	No.	I am not filing und	der Chap	oter 7. Go to line 18	3.					
	any ex	estimate that after empt property is		Yes.	•	•	•		•	xempt property is excluded and to distribute to unsecured creditors?			
	exclud admini	ed and strative expenses			□ No								
	availab	d that funds will be ble for distribution ecured creditors?			Yes								
18.		any creditors do timate that you		1-49 50-99 100-1 200-9	99		1,000-5,000 5,001-10,000 10,001-25,000			25,001-50,000 50,001-100,000 More than 100,000			
19.		uch do you te your assets to th?		\$50,0 \$100,	60,000 101-\$100,000 .001-\$500,000 .001-\$1 million		\$1,000,001-\$10 m \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50	million O million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
20.	20. How much do you estimate your liabilities to be?					\$1,000,001-\$10 \$10,000,001-\$5 \$50,000,001-\$1 \$100,000,001-\$1		million ) million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
P	art 7:	Sign Below											
For	you			ve exa	•	, and I de	eclare under penalt	ty of perjury t	hat	the information provided is true			
			If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.										
			If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).										
			I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.										
			con	nection	-	case ca	n result in fines up	•	-	money or property by fraud in imprisonment for up to 20 years,			
			-		ch Kasperek (asperek, Debtor 1			X Signatur	e of	Debtor 2			
			ſ	MM / DD / YYYY									

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Debtor 1	Mitch Kasperek		Case number (if know	<i>y</i> n)	
For your attorney, if you are represented by one  If you are not represented by an attorney, you do not need to file this page.		I, the attorney for the debtor(s) named in the eligibility to proceed under Chapter 7, 11, 1 relief available under each chapter for which the debtor(s) the notice required by 11 U.S certify that I have no knowledge after an in is incorrect.	2, or 13 of title 11, United Stach the person is eligible. I als .C. § 342(b) and, in a case in	ates Code, and have explained o certify that I have delivered which § 707(b)(4)(D) applies,	d the to
		X /s/ M. Eryk Nowicki Signature of Attorney for Debtor	Date	05/31/2017 MM / DD / YYYY	
		M. Eryk Nowicki			
		Printed name			
		M. Eryk Nowicki & Associates Firm Name			
		250 Parkway Drive, Suite 150 Number Street			
		Lincolnshire, IL 60069			
		Email: menowicki@menolaw.com	n		
		City	State	ZIP Code	
		Contact phone (847) 325-5020	Email address <b>meno</b>	wicki@menolaw.com	
		6286984			
		Bar number	State	_	

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Fill in this information to identify your case:									
Debtor 1 Mitch			Kasperek						
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse, if filing)	(Spouse, if filing) First Name Middle Name		Last Name						
United States Bar	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS						
Case number									
(if known)									

#### Official Form 104

### For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders 12/15

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an insider. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

#### Part 1: List the 20 Unsecured Claims in Order from Largest to Smallest. Do Not Include Claims by Insiders.

BMO Harris Bank	c. NA	What is the nature of the claim? Judgment Lien	Unsecured cla
Creditor's name  c/o Carlson Dash  Number Street  216 South Jeffers	n, LLC	As of the date you file, the claim is: Check all that apply.  Contingent	
Chicago City	IL 600 State ZIP 0	None of the above apply	
Contact		Yes. Total claim (secured and unsecured): \$800,000.00  Value of security − \$400,000.00	
Contact phone		Unsecured claim: \$400,000.00	
	RM INVESTME	NT TRU What is the nature of the claim?	\$173,00
Creditor's name PO BOX 46455 Number Street	i	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated  Disputed	
Chicago City	IL 606 State ZIP 0	None of the above apply  Does the creditor have a lien on your property?	
Contact			
Contact phone		Unsecured claim: \$173,000.00	

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Debtor	1 Mitch Kas	perek		Case number (if known)											
														Uns	ecured claim
3	Illinois Departr	ment of Re	venue	What	is th	ne na	ature	of the	claim	? _	Taxes				\$77,107.00
	Retailer's Occu		Unliquidated												
	Sprinfield City Contact	IL State	<b>62796</b> ZIP Code	Does	None the o	of t	he ab	ave a	lien o	•	ur proper	•			
	Contact phone						alue of nsecur		•						
4	City of Chicago	o Departm	ent of Financ	€ What	is th	ne na	ature	of the	claim	?	Judgmo	ent			\$45,000.00
	Creditor's name 333 South Stat			As of		date nge uida	e you nt ated		ne clai		Chec	k all tha	apply.		
	Chicago City	IL State	<b>60604</b> ZIP Code	Does	None the o	of t	he ab	ave a	lien o		ır proper				
	Contact				res.		itai cia alue of			and u	ınsecured	a):		<del></del>	
	Contact phone	-			nsecur		•								
5	Internal Reven	ue Service	•	What	is th	ne na	ature	of the	claim	? _	Civil Pe	enalty			\$8,000.00
	Creditor's name  Dept. of the Tre  Number Ste	easury reet		- 📙 🤆	the Continuity of the Continui	nge uida	nt ated	file, tl	ne clai	m is:	Chec	k all tha	apply.		
	Cincinnati	ОН	45999	-			he ab	ove a	oply						
	City	State	ZIP Code		the o	crec	ditor h	ave a	lien o	n you	ır proper	ty?			
	Contact				Yes.	То	tal cla	im (se	ecured	and u	unsecured	d):			
	Contact phone			-			alue of nsecur		•						
Part	2: Sign Be	low													
Ur	nder penalty of pe	erjury, I dec	are that the inf	ormatic	on pr	rovio	ded in	this	form is	true	and cor	rect.			
X /si	/ Mitch Kaspere	k		Х											
_	tch Kasperek, Deb				Sigr	natu	re of I	Debto	r 2						
Da	ate <u>05/31/2017</u> MM / DD / YY	YY			Date		MM / D	D / Y	YYY						

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BMO Harris Bank, NA c/o Carlson Dash, LLC 216 South Jefferson Street, # 504 Chicago, IL 60061

City of Chicago Department of Finance 333 South State Street Suite 330 Chicago, Il 60604

Illinois Department of Revenue Retailer's Occupational Trust Sprinfield, IL 62796

Internal Revenue Service Dept. of the Treasury Cincinnati, OH 45999

THE SUZIE STORM INVESTMENT TRUST NO. 6 PO BOX 46455 Chicago, IL 60646

TITAN COMMERCIAL LLC c/o Tyler Manic Schain, Banks, Kenny & Schwartz, Ltd 70 W. Madison Street, #5300 Chicago, Illinois 60602